PTO/SB/06 (12-04)

TOTAL

ADD'L FEE

OR

Approved for use through 7/31/2006 CMB 0651-0032 U.S. Petent and Trade men Office U.S. DEPARTMENT OF COMMERCE Under the Peperwork Reduction Act of 1995, no persons are required to respond to a collection of information of information and information of information o plays a valid CMS control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 10-647332 Substitute for Form PTO-875 Effective December 8, 2004 OTHER THAN **APPLICATION AS FILED - PART I** OR SMALL ENTITY SMALL ENTITY (Column 1) (Calumn 2) FOR NUMBER FILED NUMBER EXTRA RATE (S) FEE (B) RATE (S) FEE (1) BASIC FEE 150.00 300.00 MA Al/A MA (37 CFR 1 16(a) (b), or (c)) SEARCH FEE MA ME al/a \$250 NIE \$500 (37 CFR 1 18(1), (4. or (m)) STANINATION FEE NA M/A 3100 N/A NA \$200 (37 CFR 1 18(at (s), ar (s)) TOTAL CLAIMS در. X\$ 25 X\$50 07 OFR 1 16(4) mnus 20 + OR INDEPENDENT CLAIMS X100 X200 ment 1 · (37 OFR 1 16(N) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1 16(4)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). +180= +360-MULTIPLE DEPENDENT CLASM PRESENT (37 CFR 1 16(1)) " If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL **APPLICATION AS AMENDED - PART II** OTHER THAN OR (Column 2) (Column 3) . SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER 1/12/03 RATE (S) ADOI-RATE (3) ADDI-PREVIOUSLY AFTER EXTRA TIONAL TIONAL EN AMENDMENT PAID FOR FEE (S) FEE (5) Minus 22 XS 25 X\$50 COT CER LINGS ENDM OR Minus X100 X200 æ Application.Size Fee (37 CFR 1.16(s)) ₹ +180= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 CFR 1,180) +360= OR TOTAL TOTAL ADD'L FEE ÓR ADO'L FEE (Column 1) (Column 3) (Column 2) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (S) ADDI-RATE (\$) ADDI-EXTRA AFTER PREVIOUSLY TICHAL TIONAL 蓝 AMENDMENT PAID FOR FEE (S) FEE (\$) Total Rd X\$ 25 . ENDM OFFICE X\$50 OR Mirasa X100 X200 OF CFR LIED OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (67 CFR 1,180) +360= +180= OR

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CPR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed expication form to the USPTO. Time will vary depending upon the individual case. Any comments in the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Abstrandtia, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ODRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

TOTAL

ADD'L FEE

^{*} If the entry in column 1 is less than the entry in column 2, write "O" in column 3.